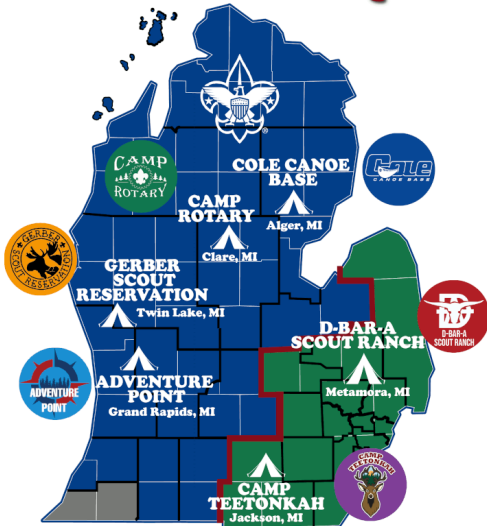


A Camp Promotion Project of Mishigami Lodge 29 Order of the Arrow

Michigan Crossroads Council Camps



BOY SCOUTS
OF AMERICA

MICHIGAN CROSSROADS COUNCIL



When this form is completed and signed, email to arrowhead-camper@mishigami.org or visit www.mishigami.org/arrowhead-camper and complete the form.



Scout BSA ARROWHEAD CAMPER SCORECARD



Name _____

Address _____

City _____

State _____ Zip _____

Pack _____

District _____

Michigan Crossroads Council, BSA

Scout BSA Patrol/Troop ACTIVITIES

Participate with your Patrol/Troop in at least 3 of the following activities in a 12 month period.

Date	Patrol Leaders Initials	Activity
_____	_____	Camporee
_____	_____	Conservation Project
_____	_____	Day Hike
_____	_____	District Spring Event
_____	_____	Community Service Project
_____	_____	Council Event
_____	_____	District Winter Event

SHORT-TERM CAMPING

Participate in 4 short-term (weekend) campouts in the 12-month period.

Date	Location
_____	_____
_____	_____
_____	_____
_____	_____



LONG-TERM CAMPING

Participate in a long term camp of at least six or more night in a 12 month period.

Date _____

Location: _____

Senior Patrol Leaders Initials _____

I hereby approve this Scout for recognition as an Arrowhead Camper Award.

Date: _____

Scoutmaster's Signature

